PATENT APPLICATION FEE DETERMINATION RECORD Effective October 1, 2001 SWIF 2/23											3	
CLAIMS AS FILED - PART I (Column 1) (Column 2)								SMALL:	ENTITY	OR	OTHER SMALL	
ŦΟ	TAL CLAIMS		22					RATE	FEE]	RATE	FEE
FOR			NUMBER FILED		NUMBER EXTRA			BASIC FI	E 370.00	OR	BASIC FEE	740.00
TOTAL CHARGEABLE CLAIMS			22 minus 20=		• 2			X\$ 9=	18	OR	X\$18=	·
INDEPENDENT CLAIMS			ninus3=		· Ø			X42=		l _{or}	X84=	
MUI	LTIPLE DEPEN	DENT CLAIM PE	RESENT					+140=	1	OR	+280=	
* If the difference in column 1 is less than zero, enter "0" in column 2								TOTAL	388	ОЯ	TOTAL	
CLAIMS AS AMENDED - PART II									7		OTHER	
		(Column 1)			mn 2) HEST	(Column 3) SM		SMAL	LENTITY	OR	SMALL	
AMENDMENT A		CLAIMS REMAINING AFTER AMENDMENT		NUM PREVI	HEST HBER HOUSLY FOR	PRESENT EXTRA		RATE	ADDI- TIONAI FEE	·	RATE	ADDI- TIONAL FEE
Š	Total	. 22	Minus	 1	しろ	- ^]	X8 9=		OR	X\$18=	
S S	Independent	· 2	Minus	***	3			X42=		OR	X84=	
كا	FIRST PRESENTATION OF MULTIPLE DEPENDENT CLAIM)	+140=		OR	+280=	
•								TOT		T _{OR}	TOTAL ADDIT, FEE	
		(Column 1)		(Cob	ımn 2)	(Column 3)	١	ADDIT, FI	:=	_	2000.766	
1		CLAIMS REMAINING AFTER		HIG NUI PREV	HEST MBER NOUSLY	PRESENT EXTRA	1	RATE			RATE	ADDI- TIONAL
AMENDMENT	Total	AMENDMENT	Minus	PAIL) J. J.	• 7	1	X\$ 9=	FEE	┨。	X\$18=	FEE
Z	Independent	. 2	Minus	***	3	= =	1	X42=	+	⊣ ՟՝	V	
₹	FIRST PRESENTATION OF MULTIPLE DEPENDENT CLAIM						1	_^~Z=	+-	┩℉	'	
								+140		OF		
								ADDIT. F		OF	ADDIT. FEE	
		(Column 1)			ımn 2)	(Column 3	1			_		
AMENDMENT C		REMAINING AFTER AMENDMENT		PREV	MEST MBER HOUSLY D FOR	PRESENT EXTRA		PATE	ADDI- TIONA FEE		RATE	ADDI- TIONAL FEE
	Total		Minus	**			1	X\$ 9:		┨ℴӻ	X\$18=	
	Independent	•	Minus	***		-]	X42=		OF	YOA	
Ľ	FIRST PRESENTATION OF MULTIPLE DEPENDENT CLAIM							-	+	Ⅎ℉	`	†
					a. W tr	2		+140:	_	OF		
If the entry in column 1 is less than the entry in column 2, write "of in column 3. If the "Highest Number Previously Paid For' in THIS SPACE is less than 20, enter "20." ADDIT. FEE OR ADDIT. FEE												
l "	"If the "Highest N The "Highest Nu	umber Previously I mber Previously P	Paid For IN Ti aid For (Total	ris SPACI or Indeper	e as less th adent) is th	e highest num	ber f	ound in the	appropriate	box in	column 1.	

FORM PTO-875 (Rev. 8/01)

Date and Trademark Office 115 DEPARTMENT OF COMMERC